



State of New Jersey
DEPARTMENT OF HEALTH AND SENIOR SERVICES
OFFICE OF EMERGENCY MEDICAL SERVICES
PO BOX 360
TRENTON, N.J. 08625-0360
www.state.nj.us/health

CHRISTINE TODD WHITMAN
Governor

CHRISTINE GRANT, J.D., M.B.A.
Acting Commissioner

MICU ADVISORY COUNCIL
September 11, 2000
MINUTES

- Call to Order:** (Dr. Nevins) The meeting was called to order at 10:10 a.m.
- Approval of Minutes:** The minutes of the June 12, 2000 meeting were approved as submitted.
- MICU Future Planning:**
(Dr. Nevins) The HCFA Coalition is lobbying to convince HCFA to delay the implementation of the new regulations until July 2001, instead of January 2001.
(Dr. Brennan) The use of Epi-Pens and Albuterol by EMT-B's was briefly discussed. Today's presentation on that topic has been delayed until the next meeting.
Deputy Commissioner Dr. DiFerdinando has reiterated his commitment to pushing through the changes to New Jersey's medical research laws, in order to bring them in line with the Federal Government's.
All of the Educators who participated in the TRIPP – Pediatric CD-ROM, were acknowledged. Amiodarone and the new ACLS guidelines were also discussed.
- Rapid Sequence Intubation:**
(Dr. Waxler) A thank you was given to all who participated in getting this program together.
The training program packets have been distributed and were made available on the table outside of this meeting room. The next decision that needs to be made is how to roll out the RSI training program and "train-the-trainers" program. A motion was made and unanimously approved to accept the training program as presented at this meeting.
- Base Station Physician Education:** (Dr. Waxler) Within the next six-months the video should be finished and ready for use among the MICU programs; to train the physicians on the base station for communicating with the paramedics in the field. Please contact Dr. Waxler if you have any questions regarding this program.
- Revisions to N.J.A.C. 8:41:**
(G. Muench) Changes are being made to N.J.A.C. 8:41. The Office of Emergency Medical Services (OEMS) has rewritten the regulations; instead of adopting individual changes throughout the document. The major proposed changes in the regulations include requiring 12-lead monitors and the removal of the requirement to maintain the UHF Med-Channel System.
(C. McSweeney) A presentation was made outlining the other changes throughout the document.
(Dr. Nevins) OEMS was thanked, for allowing the Council time to make comments in an informal manner, prior to the publication of the new regulations.
There was conversation regarding the Standard Orders, in New Jersey. Although discussion is ongoing, with the Standing Orders subcommittee and the MICU Future Planning meeting, there have not been any final determinations made yet.

Medications & Devices: (Dr. Lahita) (Dr. Hummel)	<p>The Sub-Committee on Medications and Devices met last Friday and discussed many items. The new ACLS protocols have been published, but have not been reviewed yet.</p> <p>The American Heart Association is looking for final adoptions to the ACLS protocols and an educational rollout is scheduled for January 2001. The AHA has expressed concern that this council may adopt the new protocols and drugs prior to their rollout, and caution was expressed should that occur.</p> <p>The Medical Directors have voted to address the issue of Amiodarone as an elective medication for use on the MICU. The cost, uses, effects and side effects were all discussed. A motion was made and after final consensus, Amiodarone failed to be adopted as an optional medication for the MICU formulary.</p> <p>The next medication that was brought up for discussion/approval is Vasopressin. The cost, uses, effects and side effects were discussed. A motion was made and after final consensus, Vasopressin failed to be adopted as an optional medication for the MICU formulary.</p> <p>Many of the Medical Directors seem to be unhappy with what the AHA has proposed in regards to the new protocols and medications. A motion was made that Doctors Nevins, Lahita and Brennan write a letter to the AHA voicing our concerns with the new protocols. The motion was seconded, but failed to gain consensus from the group.</p> <p>Atrovent was discussed next. The cost, uses, effects and side effects were discussed. A motion was made and after final consensus, Atrovent was adopted as an optional medication for the MICU formulary.</p> <p>The final medication that was brought up for discussion is Captopril. The cost, uses, effects and side effects were discussed. A motion was made and after final consensus, Captopril was adopted as an optional medication for the MICU formulary.</p> <p>A Cyanide anti-dote kit was to be presented today, but the presenter was unable to make this meeting for a full presentation on this kit. This kit will be discussed at the next MICU Advisory meeting.</p>
Standing Orders: (Dr. DesRochers)	<p>The idea of extending the standing orders further, prior to requiring contact with Medical Command by the paramedics was discussed. Also, a new protocol for croup and pain management in pediatric patients was discussed. They are available for review, and comments are welcomed.</p> <p>Over the next several months the committee will be looking at the new ACLS guidelines, and deciding how we can best utilize the standing orders with regard to the new ACLS guidelines prior to the paramedics contacting medical command.</p>
Legislative Committee: (S. Caputo)	<p>There are two new chapter laws that have been approved. One law requires hospitals to do pain assessments on patients; we should add this to our prehospital Patient Care Reports as well. The other law prohibits healthcare facilities from requiring certain types of mandatory overtime. This hasn't been signed into law yet, but it is expected to be in the near future.</p> <p>There are currently three bills in committee that allow EMTs to carry and administer Epi-Pens. Those will be discussed in the future.</p> <p>On the Federal level there is a Senate Bill that encourages HCFA to consider more cost effective ways of providing healthcare throughout the nation. The American Ambulance Association is also actively lobbying to increase the amount of Medicare money available for Ambulance Services. In addition there is a Bill in the House that amends the National Labor Relations Act to allow hospital based EMTs and Paramedics to act as their own bargaining units.</p>
New Jersey EMS Council: (Dr. Pruden)	<p>The Urban Search and Rescue team is opening up the application process. An extensive commitment is needed. If you are interested please contact Dr. Gluckman.</p>
Helicopter Response Program: (Dr. Hummel)	<p>The overall call volume is down due to the recent weather. The process to explore the idea of purchasing new helicopters has begun.</p>

- OEMS Update:** (G. Muench) In October, Sally Maestriperi will be retiring after over twenty years of service with OEMS. Her last EMS Council meeting will be on September 20, 2000. OEMS will have an open position to replace Sally. The job responsibilities include, overseeing the Newsletter, the EMS Week activities, NJPIES Grant management, and the OEMS Web page management. This position requires a Masters Degree. Anyone interested in applying should contact Mr. Muench. In May of this year, Deputy Commissioner DiFerdinando sent a letter to all of the MICU projects throughout New Jersey. This letter requested the MICU projects to inform the Department of Health and Senior Services (DHSS) about how the new HCFA regulations will affect your individual service. There is no report from the Communications Committee; our next meeting will be on September 13 at Robert Wood Johnson University Hospital. The Attorney General's Office is reviewing the change in the research laws and how they affect the MICU programs for future research. There should be some information made available in December of this year.
- Education:** (J. Mondoro) There was a Paramedic test held this past Saturday. There were fifteen students testing, three of which failed the practical test. For the first time, and only time, we allowed the students to have same day retesting on the practical stations that they failed. This was allowed due to the scheduled changes in the National Registry testing process. In addition Robert Dinetz wanted the group to know that the age restriction for AED use has been lowered to eight-years-old.
- New Jersey Association of Paramedic Programs:** (M. Hogan) The 7th Annual Leading Edge Conference will be held on November 7, 2000 at Robert Wood Johnson University Hospital. Please make sure that all of your Paramedics are aware of the changes in the HCFA regulations. The Association does support the extension of the Standing Order protocols as mentioned earlier by Dr. DesRochers. (G. Muench) The Association would also like to know if the OEMS stands behind our current two-tiered system and the current way that EMS is administered in New Jersey? The DHSS is very satisfied with our current system; especially with our hospital-based Medical Command. We agree with the Association, and we do support the current configuration. However, the DHSS is waiting for the official publication of the HCFA regulations before we make an official comment. We are also dedicated to maintaining the 100% ALS coverage that we have in New Jersey. The DHSS needs help in collecting the financial information that we have requested; this will help the DHSS make any future comments to HCFA. (Dr. Nevins) In my conversations with the DHSS they are clearly on the same side as we are with the changes to the HCFA Regulations.
- New business:** (Dr. Waxler) OEMS was asked to look into finding an alternate meeting site, as many people have a difficult time getting here, due to the traffic irregularities on Route 1. (Dr. Pruden) The leadership of this organization was commended for the effort they have been putting forth with all the issues we have before us. (Dr. Brennan) The *BLS Administration of Albuterol* presentation scheduled for today has been moved to the Council meeting in December. (G. Muench) The next meeting will be here at the Center for Health Affairs at 10:00 on December 11, 2000.

The meeting was adjourned at 11:45 a.m.